

POSITION	INITIAL	ID NO.	DATE
FEE DETERMINATION			
O.R.P.E. CLASSIFIER		48	11/13/00
FORMALITY REVIEW		(05955)	12/21
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final Original	6/12/00
1	1/3/00
2	1/20/00
3	1/22/00
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here